U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

and a second sec				
1. File Number U - /26//6	2. Fiscal Year Covered From:			
	[]/[]/2004 Through: []2/3]/2004.			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Owen F Betts	Name Loborets International Union Local 120			
	Labor Organization File Number			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 257 West Tefft Street	Street 257 West Tefft Street			
City Nipomo	City NIPOMO			
State CA/160 En 19 ZIP Code + 4 93444	State ZIP Code - 4			
5. Position in labor organization. Secheliary Trea	SUFER			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Supplied to the state of the st	7.b. Amount.			
Street				
City [
State ZIP Code + 4				
Signature				
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	ying documents), has been examined by the signatory and is, to the best of the			
Signed Over F. Betty	On 8-12-05 (305) \$29-7220 Date Telephone Number			

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Name of Person Filing Ower F, Betts	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name ASSCIONCY THIRD PARTY Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Sunta Anta Avanac City El Monta	9. Business deals with: a. Labor Organization b. Trust c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborons Thust Funds for SO. Col. Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Trast Funds			
Street Same as above	11.b. Approximate dollar value of such dealing. [Unknewn]			
State ZIP Code + 4	1-26-04 Dinner at restraunt			
	12.b. Amount. 288.60			
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above)			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	14.a. Nature of payment.			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Street				

14.b. Amount of payment.

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

City

State

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Name of Person Filing (DU) 27 F Bett	'د

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
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city El Monte				
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	12.b. Amount. 7,/3.02			
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money				
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.			
(including trade name, if any).				
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Trade Name, if any:	j			
P.O. Box, Bldg., Room No., if any				
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State ZIP Code + 4				
13.b. Is the Business an Employer : or Consultant ?	14.b. Amount of payment.			

Addendur 3 of 30

Name of Person Filing	Owen	1	Betts	

File Number U-

B. Held an interest in or derived income or economic benefit with monetary valus substantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is activ (2) any part of which consists of buying from or selling or leasing directly or indidealing with your labor organization or with a trust in which your labor organization.	vise dealing with the business ely seeking to represent, or irectly to, or otherwise
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Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	
Street 4399 Santa Antha Avenue	c. Employer
city El Monte	
State California ZIP Code + 4 [9/73/	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
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Trade Name, if any:	Services to Trast Funds
P.O. Box, Bldg., Room No., if any	
Street Same as above	
	11.b. Approximate dollar value of such dealing. Un Known
City	12.a. Nature of interest held or income received. $2 - / / - 04$
State ZIP Code - 4	Golf and Lunch
	12.b. Amount. 5/-90
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
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Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
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State ZIP Code - 4	· ·
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

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Name of Person Filing Owen F. Betts	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Associated Third Part & Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Santa Anita Avcince City El Monte State California ZIP Code + 4 1 9/73/	9. Business deals with: a. Labor Organization b. Trust c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Laboras Hust Fands for SO. Cal. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Sanc as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Trast Funds 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 2-28-04- Dinnen at Restraunt			
	12.b. Amount. \$74./4			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			
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Addendum 5 of 30

Name of Person Filing Ower F. Betts

Name of Person Filing Ower F. Belts	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Assaclated Third Party Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Sunta Anita Avenue City El Monte State California ZIP Code + 4 9/731.	9. Business deals with: a. Labor Organization b. Trust c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loberers Thust Fands for SO. Cal. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Sancas above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Trast Funds 11.b. Approximate dollar value of such dealing. Unknown 12.a. Nature of interest held or income received. 3-19-04 Dinner at restrount			
	12.b. Amount. [497, 75			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	er parts A and B above) or other thing of value. 14.a. Nature of payment.			
13.b. Is the Business an Employer] or Consultant ?	14.b. Amount of payment.			

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Name of Person Filing (COC1 /-, 13eFTS	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwoof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or irectly to, or otherwise
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10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborons Thust Tonds for SO. Call Trade Name, if any: P.O. Box, Bldg., Room No., it any Street Same as above	Provides 3rd party administrative Services to Trast Funds
City State ZIP Code + 4	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 3.25-04 Golf and Lunch
	12.b. Amount. 452,36
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.
(including trade name, if any). Name 1	
Trade Name, if any:	1
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13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

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Name of Person Filing	Owen	F.	Belts		File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an emptoyer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
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City	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.			
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	12.b. Amount. 4/68:86.			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	or parts A and B above) or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
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State ZIP Code + 4	•			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Addendun 8-0730

Name of Person Filing Owen F. Betts	of Person Filing Ocoen F. Batts			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Associated Third Party Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Sunta Anita Avenue City El Monte State California ZIP Code + 4 9/73/	9. Business deals with: a. Labor Organiza b. Trust c. Employer	ation		
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14.b. Amount of payment.

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13.b. Is the Business an Employer

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B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or otherwoof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise
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	12.b. Amount. 845.28
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	
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13.b. Is the Business an Employer ; or Consultant ?	14.b. Amount of payment

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Name of Person Filing	CHOCKET	1	1.76//-3	

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name FSCIOKA FIRA Part y Family Strators Trade Name, if any: [9. Business deals with: a. Labor Organization b. Trust c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborans I karst / and Sou Cal. Trade Name, if any: P.O. Box, Bidg., Room No., if any Street Same as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Trast Funds 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 4-27-04 Lunch & Lunch & Lunch			
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13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.			

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Name of Person Filing Owen F. Betts	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business ely seeking to represent, or rectly to, or otherwise
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13.b. Is the Business an Employer cr Consultant ?	14.b. Amount of payment.

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Name of Person Filing	()(o(a))	/	P() (2// / 3	File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
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	12.b. Amount.			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money				
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13.b. Is the Business an Employer . or Consultant ?	14.b. Amount of payment.			

Addendem 13 of 30

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Name of Person Filing	Owen	F.	Betts	File Number U-	

6. Name and address of Business (including inde name, if any) Name PS Column And Park Address that As Name PS Column And Park Address that As P.O. Box, Bidg., Room No., if any Seest 43 991. Sunta Aniha Avenue Size California Aniha Avenue Out B b or Se. is checked give trust or emptoyer's name. Name Const. Address had so that Sas So. California Trade Name, if any P.O. Box, Bidg., Room No., if any Steel Same Aniha Aniha See Vices Aniha Trade Name, if any Steel Same Aniha CRy C	B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwoof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise
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<u> </u>	13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

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Name of Person Filing Ower F. Betts

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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name ASSOCIATED THIRD Party Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Santa Antho Avenue City El Monte State California ZIP Code + 4 9/73/	9. Business deals with: a. Labor Organization b. Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Lobert Strust To ness for SO Col. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Som C as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Panty admission Services for Trast, 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 5-27-04 Go/L and Lan	Cand.S Unknown			
	12.b. Amount.	585124			
	(Z.Q. Millount.	harter Section to			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money					
Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	14.a. Nature of payment.	***			
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any	i				
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment	1			

File Number U-

Addendum 15 of 30

= D 110					
Name of Person Filing Ower F. Beffs	File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name Associated Third Party Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Santa Anita Avenue City El Monte State California ZIP Code + 4 9/731.	9. Business deals with: a. Labor Organization The Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Lobercos Hust Fands for SO. Call Trade Name, if any: P.O. Box, Bidg., Room No., if any Street Same as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Trast Fands 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 6-/3-04 Golf and Lunch 12.b. Amount.				
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b Is the Business an Employer or Consultant ?	14.b. Amount of payment.				

oddendum 16,0730

Name of Person Filing	Owen	F.	Betts	 File Number U-	

B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or irectly to, or otherwise
Name and address of Business (including trade name, if any).	9. Business deals with:
Name Associated Third Party Administrators	5. Dusiness deals with.
Trade Name, if any:	a. Labor Organization
P.O. Box, Bldg., Room No., if any	, b. Trust
Street 4399 Sunta Apita Avenue	c. Employer
city El Monte	
State California ZIP Code + 4 9/73/	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Const. Loberens Thust Funds for SO. Cal.	Provides 3rd party administrative Services to Trast Funds
Trade Name, if any:	Services to Itast Funds
P.O. Box, Bidg., Room No., if any	,
Street Sancas above	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	12.a. Nature of interest held or income received. Golf and Junch 6-22-04.
	AND
	12.b. Amount. £63/2
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	,
P.O. Box, Bldg., Room No., if any	
Street	
City '	
State ZIP Code + 4	
13.b. Is the Business an Employer or Corisultant ?	14.b. Amount of payment.

Addenden 17 of 30

Name of Person Filing Owen F. Belts

Name of Person Filing Ocoen F., Belts		File Number U-
B. Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	wise dealing with the business vely seeking to represent, or lirectly to, or otherwise	
8. Name and address of Business (including trade name, if any). Name Assaluted Third Party Administrators	9. Business deals with:	
Trade Name, if any:	; a. Labor Organizati	no.
P.O. Box, Bldg., Room No., if any Street 4399 Sunta ADIta AVENAC	, c. Employer	
State California ZIP Code + 4 9/73/		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealir	g.
Name Const. Loborons Thust Fands for SO. Call		Danty administrative O Trast Funds
P.O. Box, Bldg., Room No., if any		< // / 40/ / 4/1005
Street Same as above	11.b. Approximate dollar value	e of such dealing. Unknown
State ZIP Code + 4	12.a. Nature of interest held	or income received.
-	1	unchaffestrount
	12.b. Amount.	765.75
C. Received from any employer (other than an employer covered under	er parts A and B above)	Comment of arms on from
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	or other thing of value. 14.a. Nature of payment.	
(including trade name, if any).		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street) ;	
_		
City	t ;	
City State ZIP Code + 4	;	· - · · · · · · · · · · · · · · · · · ·
	14.b. Amount of payment.	

Aldendur 18 of 30

Name of Person Filing Owen F. Betts	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trace name, if any). Name i Associated Third Party Administrators Trade Name, if any:	9. Business deals with: a. Labor Organization b. Trust	
Street 4399 Sunta Anta Avenue City El Monte State California zip Code + 4 9/731	, c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Const. Loborons Thust Funds for SO. Cal.	Provides 3rd party administrative Services to Trast Funds	
Trade Name, if any:	9 / 1 / 1 20/ / 2// 3	
P.O. Box, Bldg., Room No., if any	:	
Street Same as above	11.b. Approximate dollar value of such dealing. Unknown	
City State ZIP Code + 4	12.a. Nature of interest held or income received. 7-5-04 Colf and Lunch.	
	12.b. Amount. 475.60	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name	•	
Trade Name, if any:	·	
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Allendur 19 of 30

Name of Person Filing Ocoen F. Belts	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). Name ASSCIUTED Third Party Administrators Trade Name, it any: P.O. Box, Bldg., Room No., if any 1 Street 4399 Sunta Anita Avenue City El Monte State California ZIP Code + 4 9/731	9. Business deals with: a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborous Thust Fonds for SO. Call Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Sanc as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd party administrative Services to Trast Funds 11.b. Approximate dollar value of such dealing. Unknown 12.a. Nature of interest held or income received. Colf Tournament and Lanch 7-20-94 12.b. Amount.		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	er parts A and B above)		
Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	14.a. Nature of payment.		
P.O. Box, Bldg., Room No., if any	:		
StreetCity			
State ZIP Code + 4	· · · · · · · · · · · · · · · · · · ·		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

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1000			
Name of Person Filing Owen F. Betts	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any). Name ASCCIORD Third Party Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any I Street 4399 Sunta Anita Avenue City El Monte State California ZIP Code + 4 9/73/	9. Business deals with: a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborous Thust Ton Is for SO. Cal. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Samc. as aboxe City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Trast Funds 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 9-9-04 Dinnet a.f. Jesthount		
C. Received from any employer (other than an employer covered unde	er narts A and B above)		
or from any labor relations consultant to an employer any payment of money			
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.		
Name '			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			

14.b. Amount of payment.

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?

City

State

Addendun 21 of 30 Name of Person Filing Ower F. Betts

Name of Person Filing Owen F. Betts	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Associated Third Party Haministrators	a. Labor Organization		
Trade Name, if any:	a. Cabol Organization X b. Trust		
P.O. Box, Bldg., Room No., if any	•		
Street 4399 Santa Aplta Avenue	c. Employer		
City E/Monte			
State California ZIP Code +4 9/73/			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a, Nature of such dealing.		
Name Const. Loborons Thust Fands for SOc Cal	Provides 3rd party administrative Services to Trast Funds		
Trade Name, if any:	Services to Itast Funds		
P.O. Box, Bldg., Room No., if any			
Street Sancas above	111. //		
City	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.		
State ZIP Code + 4	9-16-04		
	pinner at atestrount		
	12.b. Amount. 21/4. 5-3		
C. Received from any employer (other than an employer covered undo or from any labor relations consultant to an employer any payment of money			
13,a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name Name			
Trade Name, if any:			
Amount dates to the first term of the first term			
P.O. Box, Bldg., Room No., if any			
Street			
City	í		
State ZIP Code + 4			
13.b. is the Business an Employer or Consultant ?	14.b. Amount of payment.		

Addendun 22 of 30

Name of Person Filing Owo	n F. Betts	File Number U -

B. Held an interest in or derived income or economic benefit with monetary valuables substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or rectly to, or otherwise
Name and address of Business (including trade name, if any).	9. Business deals with:
Name Associated Third Party Administrators	p
Trade Name, if any:	, a. Labor Organization
P.O. Box, Bldg., Room No., if any	c. Employer
Street 4399 Santa ADIta AVENUC	
city E/ Monte	
State California ZIP Code + 4 9/73/	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Const. Lobercas Hust Funds for SO. Call	Provides 3rd party administrative Services to Trast Funds
Trade Name, if any:	Services to Itast Funds
P.O. Box, Bldg., Room No., if any	
Street Same as above	11.b. Approximate dollar value of such dealing. [UNKA944]
City	11.b. Approximate dollar value of such dealing. [41] Approximate dollar value of such dealing.
State ZIP Code + 4	10-14-04
	Golf and Lunch
	12.b. Amount. 7-24-80
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	3
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant . ?	14.b. Amount of payment

Aldendun 23 of 30

Name of Person Filing Ocoen F. Betts	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any). Name ASSCIATED Aird Part y Adnunistrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Sunta Anita Avenue City El Monte State California ZIP Code + 4 9/73/	9. Business deals with: a. Labor Organization \(\textstyle \text	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loberton Thu st. Fan Is for SO. Cal. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street SanC as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Itast Funds 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 10-14-04 Dinner at a restrount	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name! Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Addendar 24 of 30

Name of Person Filing Occen F. Betts

Traine of Ferson Fining Cook () , VOLO / 3		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any). Name ASSCIONED THIRD PORTY Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Santa Antha Avenue City El Monte State California ZIP Code - 4 9/73/	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborons Thurst Ton So. Cod. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Samc as above City State ZIP Code + 4	11.a. Nature of such dealing. Provides 3rd Party admir. Services to Trast / 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Minney at a	Unknown
	12.b. Amount.	95466
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above)	
(including trade name, if any). Name Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
State ZIP Code + 4		
13.b. Is the Business an Employer , or Consultant ?	14.b. Amount of payment.	

Addendus 25 of 30 Name of Person Filing Ower F. Betts

Name of Ferson Filling Cocci () , \$527 / 3		The Namber of	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Associated Third Party Administrators			
Trade Name, if any:	a. Labor Organiza:	tion	
P.O. Box, Bldg., Room No., if any	•		
Street 4399 Santa Apita Avenue	. , c. Employer		
City El Monte			
State California ZIP Code + 4 1 9/73/			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali		
Name Const. Loborers Thust Founds for SO. Cal.	Provides 3rd, Services +	Danty adm	MSHALIVE
Trade Name, if any:	Services +	Q Trast	Funds
promote and the second	i.		
P.O. Box, Bldg., Room No., if any	* * * * * * * * * * * * * * * * * * *		
Street Same as above	11.b. Approximate dollar valu	ie of such dealing.	Unknowy.
City	12.a. Nature of interest hel	······································	
State ZIP Code + 4	11-27-		/ /
	funch	atato	staun
	12.b. Amount.		747.38
C. Received from any employer (other than an employer covered unde	r parts A and B above)		
or from any labor relations consultant to an employer any payment of money			
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.		-
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4		·	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

Addendun 26 of 30

Name of Person Filing Owen 1. 13efts	File Number U-
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or individually with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name ASSCIUTED THIRD PORTY Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Sunta Anita Avenue City El Monte	9. Business deals with: a. Labor Organization b. Trust c. Employer
State California ZIP Code - 4 9/73/	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loberces Thust-Funds for SO. Call Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Same as above City State ZIF Code + 4	11.a. Nature of such dealing. Provides 3rd Party administrative Services to Itast Funds 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 11-27-94 Dinner at a restraurt
	12.b. Amount. 45
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name 1	
Trade Name, if any: P.O. Box, Bldg., Room No., if any	
Street	· ,
City	i
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

Name of Person Filing Ower F. Belts Files

File Number U-

		
B. Held an interest in or derived income or economic benefit with monetary valus substantial part of which consists of buying from, selling or leasing to, or otherwof an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	rise dealing with the business ely seeking to represent, or irectly to, or otherwise	
8. Name and address of Business (including trade name, if any). Name Associated Third Party Adin nistrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Santa Anita Avenue City El Monte State California ZIP Code + 4 9/73/	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	Provides 3rd panty adn Services to Trast	ministrative Funds
P.O. Box, Bldg., Room No., if any Street Same as above	11.b. Approximate dollar value of such dealing.	Unkrown
12.a. Nature of interest held or income received. In a land of interest held or income received. If a land of interest held or income received. If a land of interest held or income received. If a land of interest held or income received.		h
	12.b, Amount.	\$ 91.00
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money		
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	
Name		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	:	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Addendur 28 of 30

Name of Person Filing Ocuen F. Betts	File Number U-
B. Held an interest in or derived income or economic benefit with monetary vall substantial part of which consists of buying from, selling or leasing to, or otherw of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business vely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any). Name ASCIVED Aird Party Administrators Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 4399 Sunta Anita Avenue City El Monta State California ZIP Code-4 9/73/	9. Business deals with: a. Labor Organization b. Trust c. Eniployer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Const. Loborons Thust Founds Fox SO. Call Trade Name, if any: P.O. Box, Bldg., Room No., if any Street Same as above City State ZIP Code + 4	11.a. Nature of such dealing. Prevides 3rd Party administrative. Services to Trast Funds 11.b. Approximate dollar value of such dealing. Unknown 12.a. Nature of interest held or income received. 12 - 11 - 0 + Dinne in appeshing to the property of t
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	14.a. Nature of payment.
State ZIP Code + 4	

14.b. Amount of payment.

or Consultant ?

13.b. Is the Business an Employer

Addendar 29 of 30 Person Filing Ower F. Betts

Name of Person Filling (1000)	File Number 0-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name 1 / Socioted Third Party Administrators	. a. Labor Organization		
Trade Name, if any:	b. Trust		
P.O. Box, Bldg., Room No., if any	c. Employer		
Street 4399 Sunta Antha Avenue			
State California ZIP Code + 4 [9/73]			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	4	
Name Const. Loberers Thust Funds for SO. Cal.	Provides 3rd panty ad Services to Trast	ministrative	
Trade Name, if any:	Services to Itast	Fund.S	
P.O. Box, Bldg., Room No., if any			
Street Same as above	11.b. Approximate dollar value of such dealing.	Unknow	
City 1	12.a. Nature of interest held or income receive		
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C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	12.b. Amount. r parts A and B above) or other thing of value.	Straint EB3t,07	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	12.b. Amount. r parts A and B above) or other thing of value.	Straint - 54	
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U.S. Department of Laborer Office of Labor-Management Standards 200 Constitution Avenue, NW Room N-5616 Washington, D.C. 20210

RE: Form LM-30 Filing for Owen F. Betts

It is conceivable that I received the benefit of a meal, refreshment or social event from an individual who may be employed by a reportable entity under the Labor Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received.

Sincerely, Seven F. Bett U.S. Department of Laborer
Office of Labor-Management Standards
200 Constitution Avenue, NW
Room N-5616
Washington, D.C. 20210

RE: Form LM-30 Filing for Owen F. Betts

Dear Sir or Madam:

Enclosed are my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have neither documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so; I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,

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